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RESEARCH

Percepções da gravidez em adolescentes gestantes

Perceptions of pregnancy in pregnant adolescents

Percepciones del embarazo en las adolescentes embarazadas

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ABSTRACT

Objectives: identifying the perceptions of pregnancy in pregnant adolescents from a Family Health Basic Unit in São Vicente do Seridó - PB; investigating how adolescents face body changes during gestation; and the importance of prenatal care. **Method:** a descriptive, exploratory study with a qualitative approach using the Analysis of Discourse of the Collective Subject Technique. **Results:** there were detected the repercussions of pregnancy for the adolescent's life in family relationships and the representation of prenatal consultations during this period. The adolescents faced pregnancy naturally, adapting themselves and facing changes caused by the precocious pregnancy, showing interest during prenatal consultations and having family support. **Conclusion:** precocious pregnancy brought new experiences for the pregnant adolescents who need family support, prenatal care and health education, in order to better face this stage of life. **Descriptors:** Women's health, Pregnancy in adolescence, Prenatal care.

RESUMO

Objetivos: identificar as percepções da gravidez em gestantes adolescentes de uma Unidade Básica de Saúde da Família no Município de São Vicente do Seridó - PB; averiguar como as adolescentes enfrentam as transformações do corpo no período gravídico; e a importância do pré-natal. **Método:** estudo descritivo, exploratório, com abordagem qualitativa, subsidiado pela Técnica de Análise do Discurso do Sujeito Coletivo. **Resultados:** detectaram-se as repercussões da gravidez na vida da adolescente nas relações familiares e a representação das consultas pré-natais nesse período. As adolescentes procuraram encarar a gravidez naturalmente, adaptando-se e encarando as modificações causadas pela gravidez precoce, demonstrando interesse pelas consultas pré-natais e dispondo, em sua maioria, do apoio familiar. **Conclusão:** a gravidez precoce trouxe novas experiências para a vida das gestantes que necessitam de apoio familiar, do acompanhamento pré-natal e da educação em saúde para melhor enfrentar essa etapa da vida. **Descritores:** Saúde da mulher, Gravidez na adolescência, Pré-natal.

RESUMEN

Objetivos: identificar las percepciones del embarazo en las adolescentes de una Unidad de Salud de la Familia en la ciudad de São Vicente de Seridó - PB; investigar cómo las adolescentes enfrentan los cambios en el cuerpo durante la gestación; y la importancia de la atención prenatal. **Métodos:** un estudio descriptivo, exploratorio, con enfoque cualitativo subvencionado por la Técnica de Análisis del Discurso del Sujeto Colectivo. **Resultados:** se observó el impacto del embarazo en la vida de las adolescentes en las relaciones familiares y la representación de las consultas prenatales en este periodo. Las adolescentes tratan de considerar el embarazo naturalmente, adaptándose y sufriendo los cambios por el embarazo precoz, demostrando interés por las consultas prenatales y teniendo apoyo de la familia. **Conclusión:** el embarazo precoz trajo nuevas experiencias a la vida de las mujeres embarazadas que necesitan apoyo de la familia, control prenatal y educación en salud para mejor enfrentan esta etapa de la vida. **Descriptores:** Salud de las mujeres, Embarazo adolescente, Atención prenatal.

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INTRODUCTION

Adolescence is the transitional stage between childhood and adulthood, it is defined by the World Health Organization as one between 10 and 20 years old incomplete, differing from early adolescence (10-14 years old) and late adolescence (15-20 years old). In Brazil, studies show that of the 2,9 million births in 2008, it is estimated that 20% of them happen to mothers aged 15-19. In contrast, mothers aged between 10 and 14 corresponds to about 1% of those births.¹

Adolescence is marked by a number of significant changes that mark this moment of transition, which can become even more complicated when it involves an unwanted or early pregnancy. To become a mother, the teenager interfere in the natural course of her age and is faced with many responsibilities and new challenges⁽²⁾. Teenage pregnancy is therefore a difficult period; it suggests a transformative phenomenon that leads to occurrence of changes, both in behavior and in the environment in which these young girls are inserted.²

Motherhood in adolescence is an issue that has been widely reported in the media and discussed among scholars of different areas of knowledge, and has raised questions that trigger a series of public debates. Meanwhile, it is observed that teenage pregnancy is already considered a social problem of public health, especially because cause risks to the development of the generated child and the own pregnant adolescent.³

In health, questions regarding this theme emphasize the risks to the health of mothers and children from pregnancy in many young women; and, when it occurs in the age group 10 to 14 years old, the risks are even greater. In Brazil, early pregnancy and its complications are considered as the main cause of death among adolescents 15-19 years old. This risk is on the impasse experienced by teenagers who have no physical and emotional stability to take such a serious commitment, which is the design of a new life.³⁻⁴

With advancing age, the child's body undergoes changes that characterize adolescence in addition to these physical changes; this phase involves a period of profound biopsychosocial changes, especially related to sexuality, the pursuit of adult identity and autonomy before the parents. The pregnancy in this moment of life offers implications and causes profound impacts for both the teenager and for those involved in this situation.⁵

Motherhood in adolescence is the result of several risk factors, highlighting the life history of parents, socioeconomic status, support networks, psychological resources and age of the parents, etc.⁵

At this juncture it is worth mentioning that the changes caused by pregnancy do not imply only to the young teenager, one should take into consideration that this falls within the family context, and thus, the whole family participates in the gestation process and is also affected directly or indirectly with such a situation; often, there are difficulties in the relationship between parents and daughters and negative consequences for the psychological development of the same.

Therefore, the family can influence both negatively as positively the experience of pregnancy. It is known that at first, the impact of the news may cause disorder and upheaval for families, especially for not being something planned and bringing hardship and waivers to the adolescent's life, but in the background, there is an acceptance and then shall be subject to the necessary adaptations that fix a planning after the baby is born.

With the advancement of knowledge in the health area, teenage pregnancy is considered of high risk; being treated, therefore, with medical management; hence, the importance of prenatal care to prevent, in such cases, complications during pregnancy, childbirth and the birth of a child with problems. Prenatal visit, for many women, is the only opportunity they have to check their health status as well; one should also consider it as a chance for the system to fully act in promoting and eventually on recovery of their health.⁶

Given the importance of the theme proposed for research and the need for deeper, became the questions that guided this work: What are the perceptions of pregnancy in pregnant adolescents who experience this process? How will be the confrontation of adolescents in relation to body changes in the gravid period? What are the psychosocial aspects that impact the quality of life of these adolescents? What is the importance of prenatal care in the vision of these women?

And to answer the concerns emerged the study objectives: identifying the perceptions of pregnancy experienced by pregnant adolescents who attended a Basic Unit of Family Health in São Vicente do Serido-PB; and support character, as ascertain the adolescents' confrontation to body changes during gestation and the importance of prenatal care in the vision of these women.

METHOD

This study is of descriptive type, exploratory, using the qualitative approach through Collective Subject Discourse Analysis Technique, prevailing assumptions of semi-structured interview, an important condition for achieving goals.

The research was developed in the Family Health Unit I in São Vicente do Serido-PB. Data were collected in October 2012. The target population consisted of pregnant adolescents living in the city of São Vicente do Serido/PB linked to BFHU, where they perform the prenatal care and who wished to contribute to the research.

The qualitative sample amounted to a total of 6 pregnant women. The subjects were addressed in the own Basic Health Unit in the data collection period, and if agreed to participate were evaluated using the data collection instrument.

To select the sample, the following inclusion criteria were established: they were between 10 and 19 years old; receiving prenatal care regularly in the unit selected for the study at the time of data collection; and who agreed to participate. There were excluded from the research participants who do not fit the criteria for inclusion.

The empirical material was built through semi-structured questionnaires consisting of a set of open questions about the proposed theme, which respond to the research objectives, and directed to the participant. The produced empirical material was carefully analyzed qualitatively using Collective Subject Discourse analysis (DSC), which made it possible to analyze a set of individuals subject to a condition, recovering and identifying the ideas, opinions and feelings to structure modes of thinking and interpreting.⁷

It will be relevant to note that prior to data collection participants provided informed consent to participate in the research by signing the Informed Consent according recommends the Resolution 196/96 of the National Health Council. However, only gave up early data collection with the approval of institutions and consequently the project approval by the Research Ethics Committee (REC) of the State University of Paraíba (UEPB) under protocol 0312.0.133.000-12.

RESULTS AND DISCUSSION

In view of the qualitative approach adopted in this work, the evaluation of empirical data allowed us to perceive the perceptions of pregnancy experienced by pregnant adolescents seen in a Family Health Unit in São Vicente do Serido-PB. From the analysis of empirical data identified three themes that led to discussion through a dialogue with the literature.

In the main theme I - The repercussions of pregnancy in adolescent life, it was possible to identify the reflection and the impact of the first report; this time involving feelings, emotions and many decisions, as evidenced below:

Oh, I was thrilled, you know, it was a great joy that I did not expect, was one of surprise. I confess that at first I was a little scared because I was not expecting, but after I was getting used to the idea, I was happier, a little bit, and now I'm enjoying it, despite concerns. Really I was much scarred, why not expect it to happen to me, but now I'm used to and I'm happy. (DSC 1)

During pregnancy, the female body goes through several transformations. The speech below shows the main changes relevant in the body, perceived by adolescents:

Think big breasts too, which are leaking a lot, so I do not feel so comfortable, I feel very strange, why ever stays the same it was, everything changes in a woman's body. My stomach bothers me a lot, okay with stretch marks and my breasts hurt. It upsets at bedtime, because we have to sleep only one way only, on one side only, because otherwise it will hurt. (DSC 2)

Another point highlighted during the interview are the studies, considered as an important factor to be influenced because of their pregnancy status, given that they have been stopped temporarily or permanently, as the question of work, which is also affected.

The decrease in social programs, among friends, is also a prominent element due to the dedication offered to a child, which consequently leads to reduction of freedom. The speech below shows these questions:

I stopped studying, because I knew that if I continued, I would not have chance to study again because of pregnancy, and for the son I would have. Also loved to walk with my friends, and now I cannot, because I am a married woman, in addition, I also worked as I am manicurist, is now hard for me to do, that when I have my son will have to get someone to stay with him, and now it has. (DSC 3)

In thematic axis II - The impact of pregnancy on family relationships, it was observed that the news of a pregnancy can cause a great impact on the lives of family members, especially when the teenager still lives with his parents. By analyzing the discourses of adolescents, it is noticed that some family sought a natural way to accept the situation, and the socio-cultural environment in which they live a contributing factor to this acceptance, in situations like these occur frequently.

Acceptance was good, everyone supported me, but had comments that I was too young to get pregnant, just that I wanted my son now; no one encouraged me to do or not abortion. Good thing was better than I expected because of my age, I thought that they would not give me so much support and my mother and father, everybody is supporting me a lot thanks to God. Everyone liked it, my mother, my father, my stepfather, my husband, he loved when he heard the news, who else supported me was my mother, and my husband, at first my mother was so sad half because I was too young to ta with a child early if I need to do a thing is not who is going to stay with him or anything, but it's like that, when we have a child, has to have the responsibility alone. (DSC 4)

It is inferred; therefore, by the revelations of this study, that family support is very important, both by the young mother of the family, as his father's family, since the interest and concern shown by both collaborate with self-esteem of pregnant women, preventing the same feel alone on the situation. The cooperation of family and friends to face this period of intense change is essential to strengthen and guide the pregnant teenager.

Despite some situations where this support is denied, the speeches denote the sense of conformity, ordered by the knowledge about the situation and helplessness in the face of it, causing it to sag and get used to the fact. The speeches below, respectively, indicate this scenario:

Many people supported me, only my family supported me, the family of my husband did not support me, I was devastated to this day still do not feel well, but I'm consoling me and they are also getting used. (DSC 4)

It was all normal, everyone supported me, it was my mother who else supported me in my husband's family also supported me a lot, especially his mother, I was delighted by his family have accepted. (5 DSC)

During pregnancy the family is replaced by expectations for his performance as a mother and in relation to its future. Regardless of whether or not she wants to be a mother, the teenager goes to play a significant role in her life. Motherhood requires the light young

into account the fact that your life, pregnancy onwards, be bound by the demands of fi him.

Understanding that prenatal visit is the foundation for emotional support, psychological and physical pregnant adolescent, and family. It is observed that this is where the teenager finds support for the continuation of a peaceful and natural pregnancy, under the supervision of competent professionals and supported to carry out this activity.

Thus, the main theme III - The perception of pregnant adolescents in relation to prenatal consultations looked to the interest of pregnant women for prenatal visits, because it is a new experience, and also looking for support in professional health who care for them, thereby depositing the necessary confidence so there is a good accompaniment, and consequently a good quality of care. The speech below shows this statement:

I go to all queries, because it is important for me to clarify my doubts, because as I am still very young, I still do not have idea of what is pregnant, then the nurses and doctors is who will clarify the doubts. I go to prenatal so I can learn how to care for me and how during pregnancy as feed me so I can have a healthy pregnancy and have all the necessary due to child care, and take the exams it is very important in prenatal to clarify all the doubts of the pregnant woman. (DSC 6)

On the one hand the teenagers show up confused and troubled with the new stage of life, on the other, have high expectations and a great interest in pregnancy and childbirth, which is shown below:

Yes I do prenatal, because it is important for my child to be born healthy, a nothing happen to him, and me too right ?! To be healthy at the time of childbirth. So I'll go to prenatal to treat the baby to be born healthy and me too. (DSC 7)

The pregnant women emphasized the concern addressed in conducting the examinations necessary for the observation of fetal development and the importance of medication, it becomes a plus point for the issue of perception of prenatal visits by pregnant women, as seen below:

Yes, I will do prenatal, it is very important to my health and my son, monitoring of examinations of ultrasound that shows the growth of the baby and see how he is, if he's being generated, if it will be normal as will be the childbirth, it is important and helps me, because I had a bit of anemia and for that I did the tests and the nurse began to help me for me to do the treatment and get me and take care not have nor a concern in childbirth. It is important to do all the tests to find out how is the child's health and mine, if I'm not to prenatal how do I know? And the drugs they pass for children, they are born with problems? I feel very comfortable in the consultations. (DSC 8)

A good prenatal consultation associated with good health education will reflect in a pregnant more prepared to face her current situation. Thus, deserves the importance of health education during the consultations, therefore, it is necessary that professionals are qualified to perform this type of action, giving due consideration to the relevant aspects in adolescent life.

While there is the awareness that prenatal care is essential for the health of the mother and baby, there will be a longer life expectancy, better quality of care. This

requires that there is a significant commitment of government institutions to encourage the use of health care services to treat and provide an integrated assistance to mother / child pair.

Since adolescence is a very different period, as it presupposes discoveries, desires, feelings, changes and especially transformations that generate doubts and anxieties, especially regarding sexuality; it has brought to light new effects, making it a target for government action to minimize the effects of this situation.

To understand teenage pregnancy and its effects is necessary to recognize that this is a complex phenomenon, which has been associated with psychological, social and historical factors.⁸

Pregnancy brings significant changes in the body and the mind of women who experience this period. The changes of the body include breast augmentation, weight and belly growth, being the first change the least appreciated and the last, the most appreciated.⁹ Teenage pregnancy is considered a transitional period in the life of a young girl, since it requires the constant need for adjustments and changes on the part of adolescents of both sexes. Is a forced passage to adulthood and may be marked by growth and ripening or by a situation of conflict and crisis.³

There is a general consensus that the gravid condition and maturity can interfere, in a negative way, about the lives of teenagers, this may lead to unwanted consequences regarding prospects for study and work, being including the personal and professional growth of those teenagers. Also brings emotional and economic disorders to the family settings where it occurs.¹⁰

In fact, the school drop-out stands out as a result of teenage pregnancy, whether by the fact itself, by feelings of shame, because you don't like the school and/or fellow desire. However, the school-leavers and the economic hardship may not be merely consequences of motherhood, but results of existing poverty prior to pregnancy, serving the latter only to perpetuate such a situation.⁹

There is no denying the need for adjustment in different dimensions of young life process that experiences early pregnancy. This process is a rapid transition in the life cycle in which the daughter assumes also the role of mother. The condition of becoming a mother implies intense restructuring and personal and social adjustment, this produces a change of identity and a redefinition of roles, combined with the physical and psychological changes. Like every woman, the teenager who lives the process of becoming a mother redesigns its sexual route is experiential.¹¹

The increase in teen pregnancy in developing countries has aroused the interest of researchers and health professionals. The literature points out that most pregnant adolescents is considered poor, lower educational level, have less attention during the prenatal period and a higher rate of neonatal and infant mortality rates, in addition to children of low birth weight.¹⁰

Poverty triggers a series of factors that encourage teenage pregnancy, tooth they are: anticipation of menarche; early sexual activity; characterization and changing social values; psycho-emotional problems; poverty; low educational level; absence of life project;

migration; characteristics of adolescence; difficulties for contraceptive practices; sexual education absent or unsatisfactory.¹⁰

All these factors pointed to contribute to an unscheduled gestation, and many are the repercussions caused by the same; these repercussions triggering, on the one hand, disorders, on the other, new meaningful experiences for the teenager, who is becoming a more mature woman, with other goals, such as the example, taking care of a new being.

A study addressing the motivations for a future pregnancy revealed that the lack of interpersonal relationships in the home is an indicator of the desire and have a son. The young girls still reported most frequently mentioned the need to constitute a family.¹

The family provides a structure from which the young teenager needs to withstand impact size, so a family that owns a disengagement with the care and protection, will have difficulty to commit significant protective relationships.⁵

The family support to the pregnant teenager becomes paramount and a duty, because it assumes a number of factors that will help and allow this phase can be addressed in the best possible way, because it presupposes a link relationship, pervaded by trust and love. Therefore, it is consolidated as a source of emotional and material support to these young people who experience a pregnancy, family, regardless of social and financial segment, is always an important aid in support of them and their children. Teen's parents are always close, assuming responsibility for caring for her grandchildren, and represent an important source of family support, providing space for the young be and grow as she needs.³

Family members of pregnant women and mothers should give all necessary support to the same, to prevent attitudes of rejection, because of specific social factors, associated with the prejudices of society. This is an encouraging finding, because it identifies the importance of a support network for those teenagers who stumble upon the situation of pregnancy and motherhood, especially the support provided by family, be it emotional or financial type.⁹

Being considered a factor of obstetric risk, teenage pregnancy requires a specialized monitoring, in this way, prenatal care is a way of such importance for care prevention with pregnant women and children, able to be oriented towards health promotion, with the purpose of promoting the well-being, and provide opportunity for the treatment of issues that affect mothers and their children by maximizing the quality of life of subjects involved

So huge, so that there is effective control during the prenatal period pregnant women must have access to services at all levels of the Health System. In Brazil, the prenatal period is between one of the programmatic actions more offered by basic health services, including family health program.¹³

In this way, the health education comprises a series of processes that include the participation of the entire population in the context of their everyday life and not just for people at risk of illness. Health education and health promotion as a strategy in the process of individual and collective awareness of responsibilities and rights to health; from this angle, one realizes the importance of electing teaching strategies that lead pregnant women to a positive thinking in relation to their condition, expanding its ability to comprehension of what is considered healthy.¹⁴

CONCLUSION

Maternity-related difficulties during adolescence are still numerous, are to assume this responsibility, the pregnant woman is facing intense modifications that affect your life.

Thus, the interruption of temporary or definitive way in the process of education, strife in the family context, doubt, afflictions, fear, family support, fear of abandonment by the partner, losses of phases of life that hardly will restore, among others, are some of the obstacles faced by adolescents who find themselves in this situation.

Given the above, it highlights the importance of three crucial aspects in the life of the pregnant teenager: the family support, the prenatal consultation and health education. These three aspects together can influence positively on adequacy of teen to this new process in that she is experiencing.

Adopt coping strategies for those pregnant adolescents and their families is very important because it will provide the necessary support for that moment of fear and uncertainty. In this universe, fit family health teams plan actions directed to these women, such as wheels of conversation between parents and teen pregnancies, gestational monitoring courses to encourage maternal and family insight, as well as the possibility to experience new challenges in a more positive and without so many fears. In this way, the health professional must be guided in order to get the payment of health care of the adolescent and family, so there is an effectiveness of health service provision.

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